

Patient knowledge is critical for solving hospital bed crisis

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The search for a solution to 'unnecessary' hospital admissions of older people has been impeded by incomplete evidence that omits the patient's experience.

These are the findings of a study showcased at the University of Birmingham, during the Economic and Social Research Council's (ESRC) Festival of Social Science.

The project pioneers a holistic approach that will offer formal guidelines for optimising hospital beds.

Every year, the NHS experiences more than 2 million unplanned admissions of people over 65, accounting for 68 per cent of emergency-bed days. Policymakers see the high cost of this acute care as central to the NHS funding crisis. They fear that it jeopardises resources for community-based alternatives and for rehabilitation.

However, this NIHR-funded research from the University of Birmingham suggests that, at present, the extent to which unplanned admissions are actually inappropriate is unclear. It argues that, as yet, there are no standard definitions or agreed procedures. More significantly, the knowledge of patients has not been taken into account.

Professor Jon Glasby, who leads the project, says: "We need to recognise that the patient is an expert. It is likely that they are the only ones with a long-term perspective on their condition. They know how their health

has changed over time and when preventative measures might have been taken to avoid hospitalisation. Such knowledge is critical to understanding how to reduce inappropriate admissions."

The study shows that rates of 'inappropriate' admissions vary widely and this variation currently makes comparisons difficult. Rates vary according to the time of year, the locality, whether alternative services are available and whether the professional who sees the patient has experience in caring for older people.

High quality decision-making is needed when deciding whether to admit an older patient to hospital or not, the study argues. Health care professionals in different parts of the system should be supported and trained to be able to do this more effectively than at present.

The study also warns against a blanket response to the issue, as Professor Glasby explains: "The problem of inappropriate admissions manifests itself differently in different places. Therefore, locally contextualised evidence must be taken into account when creating policy around [emergency admissions](#)."

Professor Glasby and his team are working with three NHS Trusts in several locations with differing demographics. Their pioneering approach seeks to combine a range of perspectives on the experience of [hospital admissions](#). Contributions from patients, their families and carers, the hospital, social care and voluntary sector professionals will allow a holistic strategy that will enable the team, finally, to establish a formal rate of inappropriate admissions. They are planning a 'Good Practice Guide' that will go out across NHS England with the aim of supporting policy and practice in this area.

The event, 'The power of the patient experience', runs as part of the ESRC's Festival of Social Science. Professor Glasby and his team will be

talking about [older people](#)'s experiences of emergency [hospital admission](#).

Provided by University of Birmingham

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