

“Too many admissions at the weekend?”

A multicentre service evaluation to observe admissions by day of the week to dementia assessment units

Dr David Hall ⁽¹⁾, Dr George Crowther ⁽¹⁾,
Dr Benjamin R Underwood ⁽²⁾ & Dr Gregor Russell ⁽³⁾

1) Leeds & York Partnership NHS Foundation Trust, 2) Cambridgeshire & Peterborough NHS Foundation Trust, 3) Bradford District Care NHS Foundation Trust

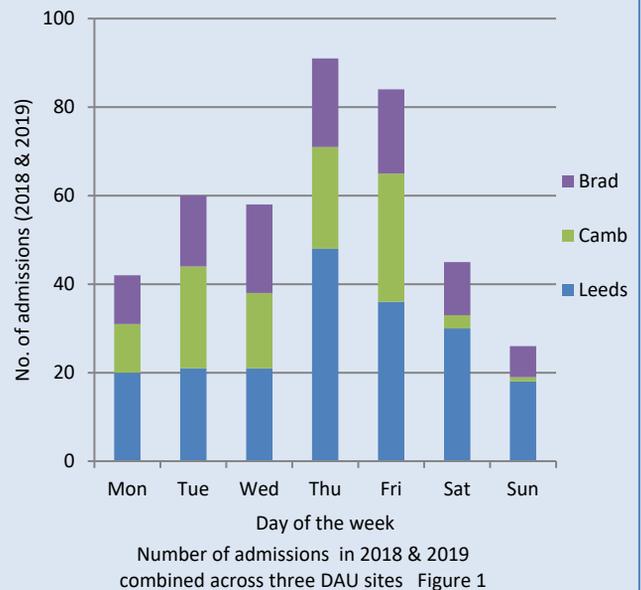
Introduction - Dementia Assessment Units (DAUs) admit some of the most distressed people living with dementia from the community and residential homes. Most people admitted will be displaying behaviour that poses risk to themselves or others. The majority are detained under a section of the mental health act and are likely to be under the care of community mental health teams in the community. The point at which someone's distress becomes so great they require admission can happen at any time. Community mental health services are available 7 days a week, but often have improved multidisciplinary team (MDT) cover in working hours. DAUs are a 24hour a day 7 day a week service, but the majority of multidisciplinary care decisions are made in normal working hours.

There has been increased attention on the so-called “weekend effect” observed in healthcare services, however this is often focussed on physical healthcare. Fewer studies have looked at weekend admissions for mental health patients. Admissions to DAUs require an MDT based approach and clear holistic care plans that are made in conjunction with patient's families and their community mental health team. These decisions are usually made in working hours, and there are rarely MDTs at the weekend. New admissions on a Friday are often not MDT reviewed until the following week. Previous studies have looked at whether patients admitted to inpatient units at the weekend had worse clinical outcomes, however. Despite no greater risk of mortality, patients admitted at weekend tended to have unresolved treatment needs⁽¹⁾.

Aim – to determine which day of the week sees the most admissions to DAUs and observe trends.

Methods - Routinely collected, anonymised data was collected as part of a larger multicentre service evaluation at DAUs in Leeds, Bradford & Cambridge. All data was collected on a predesigned and peer reviewed data collection tool. Data collection tools were completed by the individual trusts, merged and collated by the project team. All patient admissions to DAUs were collated over a set time period.

Results – A total of 406 admissions across three sites were reviewed over a 2 year period for day of the week they were admitted. This included two DAU wards at Leeds and one each at Cambridge & Bradford. Data sets for 2018 & 2019 were combined and compared across the three sites.



The most common day of the week for admission was Thursday with Friday being a close second. The most common day in Cambridge was Friday though compared to Bradford & Leeds, Cambridge had fewer admissions on Saturday & Sunday (see figure 1). The null hypothesis is that there is no difference between numbers of admissions by day of the week. Using a chi square test statistical analysis, we can reject the null hypothesis. There is a highly significant (<0.01) difference between expected and observed admissions by day of the week."

Discussion – The study shows that number of weekend admissions differs between trusts but overall, there are more admissions in the latter half of the week. This is unlikely to be an artefact of clinical need being greater on any certain day. More a reflection of how community services are organised and their ability to be responsive outside of traditional working hours. This has potential implications for community services.

It is beyond the scope of this study to look at the impact of the day of the week on outcomes. However, one might assume that it is in the patient's best interest to have an MDT review and clear holistic care plan as soon after admission as possible. Further work is required to look at the impact of this, that could advise admission policy in the future.

References

1) Patel, R. et al. (2018) 'Clinical outcomes and mortality associated with weekend admission to psychiatric hospital' *BJPsych* 209 (1)