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**REDUCING UNNECESSARY PAEDIATRIC ADMISSIONS:  
A MULTIDISCIPLINARY STUDY**

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**BACKGROUND:** The number of emergency paediatric admissions is increasing each year. The reasons for this are unclear, but may include inappropriate or preventable admissions. Respiratory disease is the commonest diagnosis for emergency admission in childhood. The rate of admission for lower respiratory infection in children is one of the NHS performance indicators. **AIMS:** 1. Identify which admissions for respiratory disease are preventable or inappropriate. 2. Explore the reasons underlying these admissions. 3. Recommend interventions for reducing unnecessary admissions. **STUDY DESIGN:** Retrospective analysis of 94 paediatric emergency admissions for respiratory disease by a multidisciplinary panel using both qualitative and quantitative methods. **RESULTS:** Over half of the admissions were assessed as being preventable by at least one professional. There was good agreement between primary and secondary care professionals on preventability of admissions. Provision of additional support, monitoring, and observation in the community emerged as a strong theme for prevention. Other themes included access to investigations and rapid reporting in the community, parent education, and appropriate and timely management of wheeze. There was poor agreement between primary and secondary care workers on appropriateness of admissions. **CONCLUSIONS:** Introduction of a paediatric home care scheme to provide additional support, monitoring and observation in the community could prevent approximately one third of emergency admissions for respiratory disease in Leicester. The scheme would need to be subject to controlled prospective evaluation that includes the views of the families using the service. The reasons for poor agreement on appropriateness between primary and secondary care need to be explored.