An evaluation of the Psychiatric Decisions Unit (PDU) and its role within the urgent care pathway in Birmingham: Poster 1
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Introduction
Accident & Emergency Departments (A&E) have long been utilised as a first point of contact for mental health patients, generally having to wait for longer periods than is desirable while awaiting transfer to psychiatric services.

- The number of patients in mental health crisis who require longer periods of assessment is increasing; placing further pressure on A&E departments.
- In November 2014 the Psychiatric Decisions Unit (PDU), also known as the Willow Suite, opened at the Oleaster Centre in Birmingham.
- The PDU is a dedicated 24 hour mental health acute assessment unit, providing an additional facility for an enhanced assessment and offering short-term support to people in mental health crisis who access help via A&E Departments.
- The unit has the ability to assess patients for up to 72 hour period, facilitate patients’ transfer in a timely and effective manner while maintaining patient’s dignity, safety and satisfaction (See ‘An evaluation of patient and staff satisfaction at the Psychiatric Decisions Unit’ - Poster 2)
- Referrals to the PDU follow an initial assessment by the RAID/Street Triage teams. The PDU is open 24 hours a day, 7 days per week and the unit aims to:
  - Offer an enhanced period of assessment and reduces unnecessary admissions
  - Reduce demand on A&E departments by people in mental health crisis
  - Reduce protracted waits in A&E/Emergency assessment units

Method
Input and activities at the PDU
Demographic information regarding patients referred to the PDU between March 2015 and August 2015.

Performance and clinical effectiveness: Impact elsewhere
- In 2014, between March and August, 298 people were admitted either formally or informally to an in-patient bed via a RAID team. The following year across the same time frame (March-August 2015) 219 people were referred to an in-patient bed via a RAID team. This indicates a 26% decrease in in-patient admissions as a result of the PDU opening.
- The average number of inpatient bed days saved due to referrals to the PDU was 6900 days.

Between March and August 2014, the Street Triage team brought 297 patients directly to A&E. In the same time frame in 2015, when the PDU was operating, Street Triage brought 180 patients directly to A&E. This is a 39% decrease in the number of patients that Street Triage have brought directly to A&E.

Discussion
The current evaluation evidences that the PDU has an important role within the urgent care pathway. Showing that the PDU works to reduce admissions to inpatient units, A&E usage for people in mental health crisis but additionally length of stay and average number of bed days, leading to inevitable cost saving benefits.

Future directions include:
- Stabilising staffing; at present contracts are produced on a year by year basis, it is important to appoint to substantive posts
- Implementing consistent medical cover
- Moving the PDU to a more suitable environment within the Oleaster centre which would provide more space
- Review access criteria (with potential to widen access) if movement of service includes co-location with Place of safety which would improve staff support and safety
- A&E breach data needs to be obtained so that further analysis can be conducted.